

186 g	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
1. Article Addressed to:	S. Is delivery discress different non-linena 12. Yes
Terry Goddard Criminal Appeals Section 1275 W. Washington Phoenix, Arizona 85007	If YES, enter delivery address below: No
PTD 9 ORDER 69-CV-425	3. Service Type  Certified Mail  Registered Insured Mail  C.O.D.
2. Article Number	4. Restricted Delivery? (Extra Fee)
(Transfer from service label) 7008 0500	0000 2896 3000
PS Form 3811, February 2004 Domestic Retu	Im Receipt 102595-02-M-1540